WATER WELL PLUGGING RECORD   Form WWC-5P   KSA 82a-1212   ID NO.

MW-3

1	LOCATION OF WATER WELL: County: Butler	Fraction NW ¼ Nw ¼ Nw ¼ NW ¼	Section Number 29	Township Number T 27 S	Range Number 3 ☑ E ☐ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐   514 South Andover Rd. Andover, KS

Global Positioning Systems (GPS) information:
Latitude: 37.678971 _____ (in decimal degrees)
Longitude: -97.134979 _____ (in decimal degrees)
Elevation: 1321.99 _____ /
Horizontal Datum: ☑ WGS84, ☐ NAD83, ☐ NAD27
Collection Method: DRL

2	WATER WELL OWNER: Unknown

RR#, St. Address, Box #:
City, State ZIP Code:

☐ GPS unit (Make/Model: _____
☑ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey

Est. Accuracy: ☐ < 3 m, ☑ 3-5 m, ☐ 5-15 m, ☐ > 15 m

---

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

```
        N
  X ┌───┬───┐
 ── NW │ ── NE ──
W  ├───┼───┤  E
 ── SW │ ── SE ──
    └───┴───┘
        S
```

4 DEPTH OF WELL 15 _____ ft.

WELL'S STATIC WATER LEVEL _____ ft

WELL WAS USED AS:

☐ Domestic	☐ Public Water Supply	☐ Dewatering
☐ Irrigation	☐ Oil Field Water Supply	☑ Monitoring
☐ Feedlot	☐ Domestic (Lawn & Garden)	☐ Injection Well
☐ Industrial	☐ Air Conditioning	☐ Other _____

Was a chemical/bacteriological sample submitted to Department? Yes ☑ No ☐

---

5 TYPE OF BLANK CASING USED:

☐ Steel	☐ RMP (SR)	☐ Wrought	☐ Fiberglass	☐ Other (Specify below)
☑ PVC	☐ ABS	☐ Asbestos-Cement	☐ Concrete Tile	_____

Blank casing diameter 2 ___ in.   Was casing pulled? Yes ☑ No ☐   If yes, how much Upper 3 feet removed _____
Casing height above or below land surface 2 _____ in.

---

6 GROUT PLUG MATERIAL: ☐ Neat cement   ☐ Cement grout   ☑ Bentonite   ☐ Other _____

Grout Plug Intervals: From 0 ft. to 15 ft.,   From _____ ft. to _____ ft.,   From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

☐ Septic tank	☐ Seepage pit	☑ Fuel storage
☐ Sewer lines	☐ Pit privy	☐ Fertilizer storage
☐ Watertight sewer lines	☐ Sewage lagoon	☐ Insecticide storage
☐ Lateral lines	☐ Feedyard	☐ Abandoned water well
☐ Cess pool	☐ Livestock pens	☐ Oil well/Gas well

☐ Other (specify below)
_____

Direction from well? contaminated well
How many feet? 0

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	15	Bentonite			

---

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/9/2016 _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 1/2/2017 _____ under the business name of BA Environmental, LLC _____ by (signature) Christopher J. Busch, P.G. _____

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
Visit us at http://www.kdheks.gov/waterwell/index.html   Telephone 785-296-5524.

KSA82a-1212

Revised 1/20/2015